

The Modernizing Americans' Health Care Plan: It is Time to Put Patients First

Plan Covers Pre-Existing Conditions, Lowers Costs and Expands Access to Health Care for All Americans

Americans face a pivotal moment in the ongoing debate over how to improve their health care. The Left wants to socialize our nation's health care, turning it into a government-run system that would limit choices, lower the quality of care and take away private health insurance from roughly 180 million Americans. Throughout the pandemic, I have continued to advocate for a patient-centered approach to health care and greater telehealth services and fought against increasing drug prices and a socialist health system. To build on these past efforts, I developed The Modernizing Americans' Health Care Plan to cover pre-existing conditions, lower costs, increase choices and put patients first.

The Modernizing Americans' Health Care Plan will:

- Protect Americans with pre-existing conditions;
- Expand affordable health insurance options;
- Lower the cost of prescription drugs;
- End surprise medical billing;
- Enhance access to care for the most vulnerable Americans; and
- Finish the fight against COVID-19 and end our reliance on China.

1. Expand Affordable Health Insurance Options

Under Obamacare, millions of Americans lost their doctors and their plans, while health care costs skyrocketed and choices diminished. After Obamacare took effect in 2013, average monthly premiums in Georgia increased an average of 188% in just five years, while the number of insurers fell. Nearly 130,000 Georgians left the individual market between 2016 and 2020, as insurance became unaffordable. The unacceptable rise in insurance costs is mainly due to the regulatory structure of Obamacare that includes regulations, mandates and taxes on health care insurance companies, small businesses and families. Instead of empowering government bureaucrats, we should empower the American patient with more affordable health care options.

This plan will:

- Ensure Americans with pre-existing conditions are protected.
- Encourage states to take innovate action, such as using Medicaid 1115 waivers and 1332 State Innovation Waivers to meet the needs of their unique population. I was proud to see the state of Georgia have their 1332 and 1115 waivers approved by the Centers for Medicare and Medicaid Services. These reforms will help more Georgians, especially those with lower incomes, access coverage.
- Allow the millions of Americans who purchase their own insurance in the individual
 market to create tax-free personal health management accounts, also known as Health
 Savings Accounts, by passing the <u>Personalized Care Act</u>. These accounts can be used to
 pay for insurance premiums, direct primary care, health care sharing ministries and other
 direct medical care arrangements that fit families' needs and budgets.
- Provide a one-time federal tax credit toward HSA contributions for low-income families with pre-existing conditions.
- Establish Guaranteed Coverage Plans to help cover patients with pre-existing conditions.
- Expand insurance options by passing the <u>Affordable Health Care Options Act</u>. This legislation I introduced codifies the Trump Administration's rule on short-term, limited duration health plans, giving consumers who have been priced out of Obamacare's individual market access to affordable health care.
- Increase competition among health insurance companies by passing the <u>American</u> <u>Healthshare Plans Act</u>. This legislation allows any membership organization, like a local chamber of commerce, to offer health insurance to its members across state lines.

2. Lower the Cost of Prescription Drugs

Patients should never have to choose between filling a prescription and paying their monthly bills. Democrats want to mimic socialized health care who negotiate artificially low drug prices and leave the U.S. on the hook for the bill. This would severely limit and slow the development of new drugs, leaving Americans without access to groundbreaking, lifesaving cures. We need to take steps to lower drug costs for patients without stifling innovation.

This plan will:

- End the foreign freeloading that drives up the cost of prescription medicines in the U.S. by passing the <u>Securing America's Medical Supply Chain and Advancing the Production of Life Saving Medicines Act</u>. This legislation that I introduced shuns price controls embraced by Nancy Pelosi and establishes the position of Chief Pharmaceutical and Medical Supply Chain Negotiator in the Office of the United States Trade Representative. This negotiator will be responsible for stopping socialist countries from offering their citizens artificially low prices at the expense of hard-working Americans.
- Create more transparency within the prescription drug market by requiring drug manufacturers to be more up-front about a patient's out of pocket costs on all direct-to-consumer advertising.
- Prohibit <u>kickbacks</u> to pharmacy benefit managers (PBMs) unless they are passed on to the patient in the form of lower costs.

- Ensure a robust generic and biosimilars marketplace is driving significant savings to patients.
- Reduce out-of-pocket expenses for our nation's seniors by modernizing Medicare Part D.

3. End Surprise Medical Billing

Far too often, Americans go to the doctor and are left on the hook for a bill they did not expect. Despite being covered by health insurance, a patient learns after the fact that an out-of-network specialist they had no way of choosing treated them. Months later, they'll receive a "surprise" medical bill that can run into the thousands of dollars. It is time for Congress to end this exploitive practice.

This plan will:

- Eliminate surprise medical bills by holding patients harmless and establishing price and coverage transparency and truth in advertising.
- <u>Protect patients' credit</u> in the event of a surprise medical bill by passing the <u>Patient Credit Projection Act</u>, legislation I introduced.
- Help patients better understand what they will be required to pay before receiving care by passing the <u>Health Care PRICE Transparency Act</u>. This would codify the Trump Administration's rules on price transparency for hospitals and health insurers.

4. Enhance Access to Care for the Most Vulnerable Americans

When it comes to health care, some of the most vulnerable citizens in Georgia and across the country are those living in rural areas and those who have served in our armed forces. Veterans and rural Georgians need greater access to innovative health care technology, additional mental health services and better-equipped rural hospitals.

This plan will:

- Ensure rural hospitals are receiving fair Medicare payments by passing the bipartisan <u>Save Rural Hospitals Act</u> to establish an area wage index floor for Medicare payments.
- Help more veterans receive quality care through telehealth by passing legislation I introduced, the bipartisan *VA Mission Telehealth Clarification Act*.
- Increase telehealth options for millions of Americans by passing the <u>TELEHEALTH</u> <u>HSA Act</u>. This legislation permanently extends a temporary provision of the *CARES Act* that allows for high-deductible health plans to offer first dollar coverage of telehealth services without relinquishing their status as HSA eligible health plans.
- Take steps to expand mental health treatment options available to our nation's veterans, including through the proper implementation of Section 203 of S. 785, the *Commander John Scott Hannon Veterans Mental Health Care Improvement Act*, language I was proud to advocate for as the bill moved through the Senate.
- Implement the <u>Rural Delivery of Online Care Services (R-DOCS) Reauthorization Act</u> of 2020, bipartisan legislation that was passed into law that I was proud to work on. This

- law reauthorizes for five years and modifies grants for telehealth networks and telehealth resource centers that serve medically underserved populations.
- Implement the <u>Improving Care in Rural America Reauthorization Act of 2020</u>, bipartisan legislation I introduced that was passed into law. This law reauthorizes for five years and modifies certain grant programs in the U.S. Department of Health and Human Services for (1) rural health services outreach, (2) rural health network development, and (3) small health care provider quality improvement.

5. Finish the Fight against COVID-19 and End our Reliance on China

The early days of the COVID-19 global pandemic exposed our dependence on adversaries like China to manufacture critical medical devices and prescription drugs. The shortages our nation faced for critical supplies such as personal protective equipment (PPE) left health care facilities relying on makeshift or reused PPE. Congress and the Trump administration took strong action to bolster the Strategic National Stockpile and distribute PPE to health care facilities, but we must grow our manufacturing capacity to ensure that we are not overly reliant on foreign nations when combatting a global pandemic like COVID-19.

This plan will:

- Relocate medical supply chains back to the U.S. by passing the <u>Bring Entrepreneurial Advancements to Consumers Here in North America (BEAT CHINA) Act</u>. This legislation that I introduced would <u>incentivize manufacturers to relocate their facilities from overseas to the USA</u> by allowing accelerated depreciation of nonresidential real property acquired to relocate facilities for the manufacture of pharmaceuticals and medical devices or supplies in the United States. It also allows an exclusion from gross income of gain from the sale or exchange of relocation property that was used to manufacture medical products in a foreign country.
- Support advanced drug manufacturing technologies programs in the USA by passing the bipartisan *Securing American's Medicine Cabinet Act*.
- Continue to <u>identify and implement tools that the FDA</u> and medical supply manufacturers can use to identify potential shortages before they occur, so that appropriate steps can be taken to prevent shortages and mitigate their impact on providers and patients. I was proud to work in bipartisan fashion to get a modified version of my bill, the <u>Preventing Essential Medical Device Shortages Act</u>, signed into law.
- Pass the bipartisan <u>Expanding Medical Partnerships with Israel to Lessen Dependence on China (EMPIL-DOC) Act</u> to improve our cooperation with Israel to develop critical medical technologies related to COVID-19 and decrease our reliance on China.
- Allow state health departments to approve the use of diagnostic tests that are not currently approved by the FDA during a public health emergency by passing the *Right to Test Act*.
- Pass the <u>Delivering Immediate Relief to America's Families</u>, <u>Schools and Small Businesses Act</u> the Senate Democrats filibustered. This legislation provides hundreds of billions of dollars for (1) testing, treatment, and distribution of a vaccine, (2) for schools and childcare centers to safety reopen, (3) and for health care providers and workers to finish the fight against COVID-19.